120 South Riverside Plaza 22nd Floor Chicago, Illinois 60606 Phone: (312) 655-1500 Fax: (312) 655-1501

WELSH & KATZ, LTD.

RECEIVED CENTRAL FAX CENTER

JUN 0 6 2005

Fax

To:		ary Examiner Hai Tr 2611, PTO	an 	From:	L, Friedman			
Fax	703-	872-9306		Pages:	2			
Phone				Date:	6/6/05			
Rei		No. 09/515,118 cet No. 7251/78746		GC:				
Urg	ent	For Review	Please Con	nment	☐Please R	eply	Piease R	ecycle
IF YO	DIATE	O NOT RECEIVE ELY (312) 655-1500 A	ALL PAGES AND ASK FOR _	OR AR' Suzanne N	E HAVING Nattingly	TROUBL	E, PLEASE	CALL
		* * *	**** CONF	<u>IDENTIA</u>	LITY NOTE	****	* * *	
or neis	hacali	nts accompanying thi and exempt from d ne individual or ent	isclosure under a	applicable nis transn	: law. The ini pission sheet.	formation : If you	is intended t are not the i	o pe ror ptended

The documents accompanying this facsimile transmission contain information which may be confidential or privileged and exempt from disclosure under applicable law. The information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that any disclosure, copying distribution or use of the contents of this information is without authorization and is prohibited. If you have received this facsimile in error, please notify us by collect telephone immediately so that we can arrange for the retrieval of the original documents at no cost to you.

JUN 0 6 2005

Sample Form (03-04)

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of:	Wachtfogel et al.			
Application No.	09/515,118			
Filed:	24 FEB 2000			
Title:	Advanced Television System			
Attorney Docket No.	7251/78746	Art Unit: 2611		

The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:

Name	Registration Number
Sanford T. Colb	26,856
David %viel	41,392

This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.

SIGNATURE of Practitioner of Record							
Name	L. Friedman		•				
Signature	Ware -	Date	6 June 2005				
Registration Number	37,135	Telephone	312-655-1500				

This form offers a sample or suggested formet for an authorization of a practitionar who is not of record. See MPEP § 713.05 for more information. This sample form is not an OMB officially approved form.

If you need assistance in completing the form, cell 1-800-PTO-9199 and select option 2.